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MONTANA GENERAL EDUCATIONAL DEVELOPMENT (GED) TESTING PROGRAM 16-YEAR-OLD WAIVER APPLICATION FORM

GED Test Center:	City:	ID#: 3000290	
APPLICANT SECTION (to be completed by Applicant)			
Social Security Number:	Date of Birth:	Sex: Male Female	
Phone Number:			
Last Name:	First Name:	Middle Initial:	
Mailing Address:	City:	State: Zip:	
Last School Attended:	City:	State:	
Last Date Attended: Highest Grade Completed:			
Applicant Signature		Date:	
SCHOOL SECTION (to be completed by c	hief education officer)		
document verifying applicant has been out of school 90 days OR 2) letter of approval to pursue GED on school letterhead signed by chief education officer providing applicant's withdrawal date. The applicant last attended school in a state other than Montana. The applicant has been advised of local in-school options and has never enrolled in this public school district. Attach verification letter. The applicant has graduated from a high school not accredited by the state of Montana. Date of graduation Attach request letter. The applicant resides at a Job Corps Center; youth correctional facility; group home; alcohol/drug treatment center; or is under court/youth probation jurisdiction. Applicant's circumstances and withdrawal from tradition school setting warrant pursuit of GED. Attach facility director's request letter. I certify the applicant and his/her parent, legal guardian, or advocate have been advised of available in-school options and that pursuit of a GED is considered in this applicant's best educational interest. School Name: Address: City: State: Zip:			
School Name: Address:	City:	State: Zip:	
School Phone Number:	School O	official's Signature	
PARENT/LEGAL GUARDIAN/ADVOCA	TE* SECTION (must be	e notarized)	
I hereby authorize by my signature permission for through the GED Testing Program.			
Parent/Legal Guardian/Advocate* Signature *Advocate: A responsible adult with knowledge of program. Advocate's signature required in lieu of p guardian. Relationship to Applicant: (check one) PARENT Mailing Address: TO BE COMPLETED BY NOTARY PUBLIC:	Farent/legal guardian signatur □ LEGAL GUARDIA City: Subscribed and sworn to Signature of Notary Pub	re when applicant does not live with parent/legal	

CHECK LIST FOR FILLING OUT THE 16 YEAR-OLD WAIVER FORM

becauschood the fo	er of Minimum Age Requirement: An applicant 16-years of age who are of special and warranted circumstances is no longer enrolled in a regular of program may apply for a waiver of the minimum age requirement provided ollowing criteria can be documented (16-year old waiver applications must bmitted for review and approval to the State GED Administrator prior to g):
	1. Completed, signed and notarized 16-year old Age Waiver Application Form with required school documentation attached (2C) demonstrating consensus of applicant; school officials; and applicant's parent/legal guardian that the GED testing program is considered in the best educational interest of the applicant;
	2. Original letter from an Adult Basic Education (ABE) Director or Literacy Program Director certifying that the applicant has enrolled in/attended GED preparation classes and is academically prepared to attempt the GED Test Battery; and/or documentation from same source certifying the applicant obtained pre-test scores substantiating preparedness for the official GED Test Battery;
	3. Letter of documentation, on official letterhead, establishing applicant's need to obtain a GED at age 16, originally signed and coming from one of the following:
	a) post-secondary admissions officer

b) employer requiring GED for employment purposes